PART B- FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

> Alexandria, Virginia 22313-1450 Or Fax (571) 273-2885

648.43120CX1

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All Further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 04/11/2007

ANTONELLI, TERRY STOUT & KRAUS, LLP 1300 NORTH SEVENTEENTH STREET **SUITE 1800** ARI INGTON, VA 22209-3873

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying Papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope Addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name) (Signature) (Date)

FILING DATE APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/812 087 Akitaka Makino 648 43120CX1 TITLE OF INVENTION: VACUUM PROCESSING APPARATUS SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE (S) DUE DATE DUE

Nonprovisional NO	\$1400	\$300	\$0	\$1700	07/11/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MOORE, KARLA	A	1763	118-719000		
1. Change of correspondence address or indication of "Fee Address: (3" CPR 1.363). Change of correspondence address (or Change of Conrespondence Address from PTOS81722 sitaments. agents OR, alternatively. The Conference of Conferenc			2. For printing on the patient front page, list (I) the names of up to 3 registered patient attorneys 1 ANTONELLI, TERRY, STOUT Or agents OR, alternatively, (2) the name of single firm (having as member a registered attorney or agent)		

attorneys or agents. If no name is listed no name will be printed

ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment

(A) NAME OF ASSIGNEE

Hitachi High-Technologies Corporation Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual 🛛 Corporation or other private group entity Government Payment of Fee (s):

4a. The following fee(s) are enclosed:

Publication Fee (No small entity discount permitted) Advance Order-# of Copies 4

A check is enclosed Payment by credit card, Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

overpayment, to Deposit Account Number 01-2135.

5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application Identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Interest as shown by the records of the United States patent and Trademark Office

Authorized Signature _____/Melvin Kraus/ Date: JUNE 21, 2007 Typed or printed name Melvin Kraus Registration No. 22,466

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and Submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete the Submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent tot the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450. Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number